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NO. 5728 P. 1

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Pabst Patent Group LLP  
400 Colony Square, Suite 1200  
1201 Peachtree Street  
Atlanta, GA 30361

Telephone (404) 879-2150  
Telefax (404) 879-2160

information@pabstpatent.com  
www.pabstpatent.com

## TELEFAX

**Date:** October 14, 2005 **Total pages:** 13 including cover  
**To:** US PTO **Telephone:** **Telefax:** 571-273-8300  
**From:** Rivka Monheit **Telephone:** 404-879-2152 **Telefax:** (404) 879-2160  
**Our Docket No.** AI 9248 US **Client/Matter No.** 095172/00003  
**Your Docket No.**

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### MESSAGE:

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicants:** Michael Cowley, Roger Cone, Malcolm James Duncan Low, Andrew Butler, Stephen Robert Bloom, Caroline Jane Small, Rachel Louise Batterham, Mohammed Ali Ghatei

**Serial No.:** 10/501,411

**Group Art Unit:** 1616

**US National**

**Filing Date:** July 12, 2004

**371 Filing**

**Date:** July 7, 2005

**Examiner:**

**For:** *MODIFICATION OF FEEDING BEHAVIOR USING PPY AND GLP-1*

### Attachments:

Transmittal Form PTO/SB/21

Fee Transmittal Form PTO/SB/21

Request for Corrected Filing Receipt

Marked-up copy of Filing Receipt

Copy of Application Data Sheet

{45061183.1}

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PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

12

Application Number

10/501.411

Filing Date

July 12, 2004

First Named Inventor

Michael Cowley

Art Unit

1616

Examiner Name

Attorney Docket Number

AI 9248 US

**ENCLOSURES (Check all that apply)**

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete Application☐ Reply to Missing Parts  
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional ApplicationPower of Attorney, Revocation  
Change of Correspondence Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_

☐ Landscape Table on CD

Remarks



After Allowance Communication to TC

Appeal Communication to Board  
of Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify  
below):Request for Corrected Filing  
Receipt; copy of Filing Receipt  
showing changes; and copy of  
Application Data Sheet**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Pabst Patent Group LLP

Signature

*Rivka D. Monheit*

Printed name

Rivka D. Monheit

Date

October 14, 2005

Reg. No.

48,731

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature

*Carla Stone*

Typed or printed name

Carla Stone

Date

October 14, 2005

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

**Complete if Known**

|                      |                |
|----------------------|----------------|
| Application Number   | 10/501,411     |
| Filing Date          | July 12, 2004  |
| First Named Inventor | Michael Cowley |
| Examiner Name        |                |
| Art Unit             | 1616           |
| Attorney Docket No.  | AI 9248 US     |

**METHOD OF PAYMENT (check all that apply)**
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-3129 Deposit Account Name: Pabst Patent Group LLP

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description   | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50       | 25                    |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200      | 100                   |
| Multiple dependent claims   | 360      | 180                   |

|   |                     |                 |                      |                                  |                 |                      |
|---|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| <b>Total Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 20 or HP = <u>0</u> x _____ = _____                                 |                     |                 |                      |                                  |                 |                      |
| HP = highest number of total claims paid for, if greater than 20      |                     |                 |                      |                                  |                 |                      |
| <b>Indep. Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |                                  |                 |                      |
| - 3 or HP = <u>0</u> x _____ = _____                                  |                     |                 |                      |                                  |                 |                      |
| HP = highest number of independent claims paid for, if greater than 3 |                     |                 |                      |                                  |                 |                      |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|   |                     |   |                 |                      |
|---|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____ |                     |   |                 |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

Fees Paid (\$)

**SUBMITTED BY**

|                   |                         |                                   |                  |           |                |
|-------------------|-------------------------|-----------------------------------|------------------|-----------|----------------|
| Signature         | <u>Rivka D. Monheit</u> | Registration No. (Attorney/Agent) | 48,731           | Telephone | (404) 879-2152 |
| Name (Print/Type) | Rivka D. Monheit        | Date                              | October 14, 2005 |           |                |

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